Laughter is the best medicine

AN you laugh when you are dying?
Perhaps the better question is, can or should you make a dying person laugh?
Rachel Anthony Stephen believes that laughter truly is the best medicine when she deals with her patients who have life limiting illness.

A graduate of UCSI University's School of Nursing, she has been a palliative care nurse with Hospis Malaysia for the past five years.

As a palliative care nurse, most of her patients have limited time to live, thus she deals with death perhaps more often than a regular nurse.

Surprisingly, when she does house-calls for her patients, it is not a sombre affair.

"We will be talking about cars or shoes – whatever they liked before they become too ill and we will be laughing away," she says.

The patients don't have to talk about their illness if they don't want to.

The bubbly 26-year-old shares that even when things may not seem too good, her patients are still able to make jokes. One even teased that after he dies, he will appear in her dream to reveal the winning lottery number.

With a wide grin, Rachel says many people who knew her were surprised that she decided to study nursing.

"I like to sing, I like to dance, and I like to talk," she says.

Even her family members had assumed that she would venture into the media industry.

Knowing what she wanted to do, she signed up for her Diploma in Nursing at UCSI University's School of Nursing (UCSI SON).

And when she started her lessons at UCSI, she knew she had made the right choice. Her diploma studies also included components such as mental and physical examinations, research and statistics, which were usually reserved for degree programmes.

In addition to the comprehensive curriculum, what Rachel likes about her time at UCSI is that the students were divided into small groups for their clinical practice. Each group was then closely guided by a clinical instructor (CI) who could give each student personalised attention as the group was not too big.

This enabled Rachel to personally conduct the procedures taught by the CI instead of just observing from the back of the crowd.

Compassion and ambition

It was also thanks to UCSI that Rachel was introduced to palliative care and Hospis Malaysia. Having started her career as a

nurse, School of Nursing head Assoc Prof Jeya Devi Coomarasamy understands the importance of palliative care.

To date, the school has raised more than RM10,000 for Hospis Malaysia through fundraising campaigns.

This mutual respect also saw Hospis Malaysia CEO Dr Ednin Hamzah delivering a talk about palliative care at UCSI. Attending the talk as an undergraduate made Rachel realise that palliative care was her passion, and that Hospis Malaysia was where she wanted to launch her career.

Five years later, she has found personal and professional satisfaction in her career at Hospis Malaysia.

Rachel's day starts at 8am with a meeting among the nurses and doctors. The nurses will discuss their patients' progress the night before and whether there needs to be a change in their patient's management.

About an hour later, the nurses begin scheduling house-calls for the approximately 50 patients under each of their care. A quick lunch later, Rachel would be off to visit her patients.

What she loves best about working in Hospis Malaysia is the level of empowerment she receives. Every nurse has access to her doctors. No matter where the doctor is, if he

receives a call from his Hospis Malaysia nurse, he will always answer the call.

The nurses are also constantly given training to enhance their professional knowledge. These include weekly communication classes and occasional quizzes from the doctors.

At the end of every year, the nurses also sit for an exam set by Dr Ednin. It could be a written exam based on theories or physical examinations. After sitting for the exams, the nurses will then better understand which areas of their knowledge should be further improved upon.

All this makes Rachel confident about her palliative nursing skills and knowledge, which enable her to monitor her patients' health.

While constantly being pushed to raise their level of palliative nursing, Rachel and her colleagues are also given opportunities to enhance their careers. Depending on their interest, they can further develop their knowledge in the various aspects of palliative care such as paediatric palliative care or grief and bereavement management.

When she was asked by Dr Ednin on what her interests were, she said that she "liked talking and presenting". So he arranged for



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